



**Application Form: print clearly and complete in full**

Please review the invitation letter for participation requirements/expectations. Preference will be given to school teams that are participating in the same subject area workshop.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
School: \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_  
School Fax #: \_\_\_\_\_ School Telephone #: \_\_\_\_\_  
Current teaching assignment: \_\_\_\_\_  
Personal e-mail: \_\_\_\_\_ Work e-mail: \_\_\_\_\_

**Important:** please put an asterisk (\*) next to your preferred e-mail to receive communications from AERO

Does your school use AERO? Yes \_\_\_\_\_ No \_\_\_\_\_ Do you have experience writing units? Yes \_\_\_\_\_ No \_\_\_\_\_

This application is for the following workshop (*choose one*):

\_\_\_\_\_ Mathematics      \_\_\_\_\_ English/Language Arts      \_\_\_\_\_ Science      \_\_\_\_\_ Academic Leaders  
\_\_\_\_\_ World Languages      \_\_\_\_\_ Social Studies

**\*Participants are expected to bring a laptop computer with them\***

**Accommodations**

Housing for participants will be provided free of charge in single rooms at Marymount University in Arlington, Virginia. Check-in is on Sunday, June 25th after 9 a.m.; check-out on Friday is at 1:00p.m. (The workshop ends at 12:00p.m. on Friday.) Participants are expected to arrive by 3:00p.m. on June 25th and stay for the entire week.

Please indicate the nights for which you need accommodations at Marymount.

Sunday \_\_\_\_\_ Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Please indicate gender (*for room assignment purposes*): Male \_\_\_\_\_ Female \_\_\_\_\_

**Meals**

Breakfast, lunch and dinner will be provided in the university dining room. There will be an Institute orientation and welcome dinner Sunday, June 25, beginning at 6:00p.m. Please indicate dietary restrictions if any:

Signed (Applicant): \_\_\_\_\_ Date: \_\_\_\_\_

NB: Signing affirms your commitment to attend all five days of the Institute; certificates will only be given to those who complete the entire week. Signing also affirms your agreement to present proof of vaccination upon check-in at Marymount and to wear masks in closed spaces.

Signed (Head of School): \_\_\_\_\_ Date: \_\_\_\_\_

**The application must arrive by Monday, March 6, 2023.** Please Email or FAX the completed form to:

Stephanie Barnett, U.S. Department of State  
Office of Overseas Schools, SA-1, Room H328  
Washington, DC 20522-0103  
Email: [BarnettSF@state.gov](mailto:BarnettSF@state.gov)  
Fax: +(202) 261-8224